| POSITION | INITIALS | ID NO. | DATE |
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| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | *Oley* | 5966 7 | 7/30/99 |

## INDEX OF CLAIMS

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| ✔ | .......................... Rejected | N | .......................... Non-elected |
| = | .......................... Allowed | I | .......................... Interference |
| – | (Through numeral)... Canceled | A | .......................... Appeal |
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If more than 150 claims or 10 actions
staple additional sheet here

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